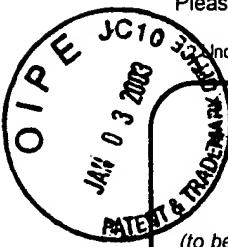


Please type a plus sign (+) inside this box →

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

#5
1631
OED
1/15/03

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/691,405
		Filing Date	October 17, 2000
		First Named Inventor	Steven R. BINDER et al.
		Group Art Unit	1631
		Examiner Name	Allen, Marianne P.
Total Number of Pages in This Submission	4	Attorney Docket Number	02558B-063700US

RECEIVED

JAN 06 2003

TECH CENTER 1600/2900

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	References (4 total)
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	Form PCT/ISA/220
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	Return Postcard
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP M. Henry Heines	
Signature		
Date	December 30, 2002	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

December 30, 2002

Typed or printed name	Amanda J. Gorthy	
Signature		Date
	December 30, 2002	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

SF 1418647 v1

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Assistant Commissioner for Patents
Washington, D.C. 20231

PATENT
Attorney Docket No.: 02558B-063700US
Client Reference No.: BRP00107

On DECEMBER 30, 2002
TO: TOWNSEND and TOWNSEND and CREW LLP
By: 

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Steven R. BINDER and John
GLOSSENGER

Application No.: 09/691,405

Filed: October 17, 2000

For: PATTERN RECOGNITION
METHOD FOR DIAGNOSIS OF
SYSTEMIC AUTOIMMUNE DISEASES

Examiner: Allen, Marianne P.

Art Unit: 1631

**SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98**

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B, are being called to the attention of the Examiner. Copies of the references are enclosed. Applicants bring to the attention of the Examiner GRUS, F. *Electrophoresis* 1997, pp. 1120-1125, Vol. 18 listed on the attached PCT Search Report which was previously cited in the instant application and is, therefore, not being submitted herewith.

Also enclosed is a copy of the Search/Examination report mailed on November 15, 2002 corresponding to the PCT application.

RECEIVED

JAN 06 2003

TECH CENTER 1600/2900

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

CERTIFICATION

I hereby certify that each item of information contained in this Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement.

Applicants believe that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



M. Henry Heines
Reg. No. 28,219

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, 8th Floor
San Francisco, California 94111-3834
Tel: 415-576-0200
Fax: 415-576-0300
MHH:ajg